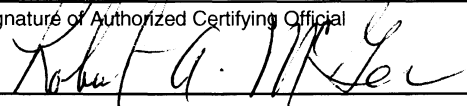
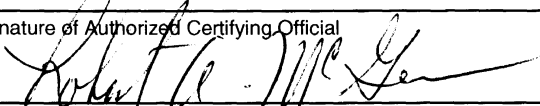


FINANCIAL STATUS REPORT
(Short Form)

1. Federal Agency and Organizational Element to Which Report is Submitted Denali Commission		2. Federal Grant or Other Identifying Number Assigned By Federal Agency 0009-DC-1999-T2		OMB Approval No. 0348-0039		Page 1 of 2 pages	
3. Recipient Organization (Name and complete address, including ZIP code) Tanana Chiefs Conference, Inc. 122 First Ave. Fairbanks, AK 99701							
4. Employer Identification Number 92-0040308		5. Recipient Account Number or Identifying Number 7530		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	
8. Funding / Grant Period From: (Month, Day, Year) 1/1/2001		To: (Month, Day, Year) 4/30/2004		9. Period Covered by this Report From: (Month, Day, Year) 1/1/2001		To: (Month, Day Year) 9/30/2001	
10. Transactions:				I Previously Reported		II This Period	
a. Total outlays				41,294.64		35,989.60	
b. Recipient share of outlays							
c. Federal share of outlays				41,294.64		35,989.60	
d. Total unliquidated obligations							
e. Recipient share of unliquidated obligations							
f. Federal share of unliquidated obligations							
g. Total federal share (Sum of lines c and f)						77,284.24	
h. Total Federal funds authorized for this funding period						175,064.00	
i. Unobligated balance of Federal funds (Line h minus line g)						97,779.76	
11. Indirect Expense		a. Type of Rate (place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
		b. Rate		c. Base		d. Total Amount	
		e. Federal Share					
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing							
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.							
Typed or Printed Name and Title Robert A. McGee, Director of Finance and Administration						Telephone (Area code, number and extension) (907) 452-8251 Ext. 3117	
Signature of Authorized Certifying Official 						Date Report Submitted 1/15/2003	

FINANCIAL STATUS REPORT
(Short Form)

1. Federal Agency and Organizational Element to Which Report is Submitted Denali Commission		2. Federal Grant or Other Identifying Number Assigned By Federal Agency 0009-DC-1999-T2		OMB Approval No. 0348-0039		Page of 1 2 pages	
3. Recipient Organization (Name and complete address, including ZIP code) Tanana Chiefs Conference, Inc. 122 First Ave. Fairbanks, AK 99701							
"REVISED"							
4. Employer Identification Number 92-0040308		5. Recipient Account Number or Identifying Number 7530		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	
8. Funding / Grant Period From: (Month, Day, Year) 1/1/2001		To: (Month, Day, Year) 4/30/2004		9. Period Covered by this Report From: (Month, Day, Year) 1/1/2001		To: (Month, Day, Year) 9/30/2001	
10. Transactions:				I Previously Reported		II This Period	
				III Cumulative			
a. Total outlays				0.00		41,294.64	
b. Recipient share of outlays							
c. Federal share of outlays				0.00		41,294.64	
d. Total unliquidated obligations							
e. Recipient share of unliquidated obligations							
f. Federal share of unliquidated obligations							
g. Total federal share (Sum of lines c and f)						41,294.64	
h. Total Federal funds authorized for this funding period						175,064.00	
i. Unobligated balance of Federal funds (Line h minus line g)						133,769.36	
11. Indirect Expense		a. Type of Rate (place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
		b. Rate		c. Base		d. Total Amount	
e. Federal Share							
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing							
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.							
Typed or Printed Name and Title Robert A. McGee, Director of Finance and Administration						Telephone (Area code, number and extension) (907) 452-8251 Ext. 3117	
Signature of Authorized Certifying Official 						Date Report Submitted 1/15/2003	